

**United States District Court
For The District of Columbia**

**ELECTRONIC CASE FILES
ATTORNEY/PARTICIPANT REGISTRATION FORM**

LIVE SYSTEM

This form shall be used to register for an account on the Court's Electronic Case Files (ECF) system. Registered attorneys and other participants will have privileges both to electronically submit documents, and to view and retrieve electronic docket sheets and documents for all cases assigned to the Electronic Case Files system.

The following information is required for registration:

If you are appointed pro bono or pro hac vice, please provide the case number:

First Name/Middle Initial/Last Name: _____

Last four digits of Social Security Number: _____

DC Bar ID#: _____

Firm Name: _____

Firm Address: _____

Voice Phone Number: _____

FAX Phone Number: _____

Internet E-Mail Address: _____

By submitting this registration form, the undersigned agrees to abide by the following rules:

1. This system is for use only in cases permitted by the ***U.S. District Court for the District of Columbia***. It may be used to file and view electronic documents, docket sheets, and notices. Please visit the Court's ECF Internet Website to schedule training.
2. Pursuant to Federal Rule of Civil Procedure 11, every pleading, motion, and other paper (except list, schedules, statements or amendments thereto) shall be signed by at least one attorney of record or, if the party is not represented by an attorney, all

papers shall be signed by the party. An attorney's/participant's password issued by the court combined with the user's identification, serves as and constitutes the attorney's/participant's signature. Therefore, an attorney/participant must protect and secure the password issued by the court. If there is any reason to suspect the password has been compromised in any way, it is the duty and responsibility of the attorney/participant to immediately notify the court. This should include the resignation or reassignment of the person with authority to use the password. The Court will immediately delete that password from the electronic filing system and issue a new password.

3. An attorney's/participant's registration will not waive conventional service of a summons and complaint, subpoena, or other judicial process; submit the client to the jurisdiction of the Court; or operate as a consent to accept service of pleadings, documents, and orders in actions in which such attorney/participant has not entered an appearance. An attorney's/participant's registration will constitute a waiver in law only of conventional service of other non-process pleadings, documents, and orders in the case. The attorney/participant agrees to accept, on behalf of the client, service of notice of the electronic filing by hand, facsimile or authorized e-mail.
4. Upon receipt of your login and password, you are strongly encouraged to change your password, which may be done through the Utilities function, to a name easily recalled. You may be subjected to a fee, should the Clerk's Office have to create a new password for you, or alternatively, you may be required to appear in person to receive your new password.
5. Attorneys must be active members of the bar of this Court, or government attorneys who are employed or retained by the United States, or who have been permitted to proceed pro hac vice, must file pleadings electronically.
6. Whenever a filer's e-mail address changes, the user agrees to update their ECF profile to show the new e-mail address. The system is robust enough to permit counsel to change their own e-mail address within the ECF System. Effective December 9, 2008, pursuant the directions from the Court's Information Technology Committee, the Clerk's Office will no longer monitor bounced e-mails.
7. Login & Passwords will be issued within 48 business hours of being received in the Clerk's Office.

Please return this form via E-mail: ecf_login@dcd.uscourts.gov
Fax: Files & Intake (202) 354-3524
or Mail: U.S. District Court for the District of Columbia
Attn: Attorney Admissions
333 Constitution Avenue NW, Room 1225
Washington, DC 20001

Applicant's Signature: _____

Full Last Name

Initial of First Name

Last 4 Digits SS#